

Revision. HCFA-PM-85-14 (BERG)
SEPTEMBER 1985

ATTACHMENT 4.18-A
Page 1
OMB NO.: 0938-0193

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: MINNESOTA

A. The following charges are imposed on the categorically needy for services other than those provided under section 1905(a)(1) through (5) and (7) of the Act:

Service	Type Charge			Amount and Basis for Determination
	Deduct.	Coins.	Copay.	

NOT APPLICABLE. NO SUCH CHARGE IS IMPOSED.

HCFA
Sup

85-63

Revised 12/30/85
Appr. 1/2/86
10/1/85

TN No. _____
Supersedes
TN No. _____

Approval Date _____

Effective Date _____

HCFA ID: 0053C/0061E

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: MINNESOTA

- B. The method used to collect cost sharing charges for categorically needy individuals: NOT APPLICABLE

☐ Providers are responsible for collecting the cost sharing charges from individuals.

☐ The agency reimburses providers the full Medicaid rate for a services and collects the cost sharing charges from individuals.

- C. The basis for determining whether an individual is unable to pay the charge, and the means by which such an individual is identified to providers, is described below:

NOT APPLICABLE

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TN No. _____
Supersedes _____
TN No. _____

Approval Date _____

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A-179 # 85-63 Date Rec'd 12/30/85
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: MINNESOTA

- D. The procedures for implementing and enforcing the exclusions from cost sharing contained in 42 CFR 447.53(b) are described below:

NOT APPLICABLE

- E. Cumulative maximums on charges: NOT APPLICABLE

☐ State policy does not provide for cumulative maximums.

☐ Cumulative maximums have been established as described below:

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